

HOMELESSNESS IN MISSOURI

Prepared by

Governor's
Committee
To End
Homelessness

2003

STATE OF MISSOURI

HOMELESS ACTION PLAN TO END CHRONIC HOMELESSNESS IN TEN YEARS

On September 14, 2001, the State of Missouri submitted an application to participate in the first federally sponsored Policy Academy for State and Local Policymakers on Improving Access to Mainstream Services for Persons Who Are Homeless. The application included a letter from Governor Holden who pledged his support for the application and expressed his conviction that the multi-disciplinary membership of the policy team would be able to develop a state action plan to address homelessness in Missouri.

The Bush Administration has made ending chronic homelessness in the next decade a top objective of the U.S. Department of Housing and Urban Development (HUD). The Administration has announced that it will continue to sponsor additional homeless policy academies for states that have not yet participated. The Administration has also reactivated the federal Interagency Council on Homelessness after a six year lapse and this past Spring of 2003 announced the pooling of \$35 million in new federal dollars to provide supportive housing and critical services to states implementing plans developed through the homeless policy academies. The cities of Kansas City and St. Louis applied for this funding.

The contents of this report outline the goals and action steps that the Missouri Governor's Committee to End Homelessness believes will enable the state to fully access the federal resources that will be necessary to end chronic homelessness in

26,100 people experience homelessness in Missouri each day and another 19,600 are living in overcrowded dwellings, doubled and tripled up, without a home to call their own.

--2001 MASW Survey

People experience homelessness due to poverty and lack of affordable housing. Two factors contribute to increasing poverty—eroding work opportunities and declining public assistance.

Missouri in the next decade. The goals are lofty, the action steps ambitious and the resources needed to accomplish these objectives will require the allocation of scarce additional state funding.

The heart of this proposal is, however, quite simple. A relatively small number of all the individuals who are homeless are unable to find their way back to a stable life. They suffer from physical and mental illnesses, alcoholism and drug addictions. They are homeless for extended periods of time, interrupted only by short confinements in public hospitals, jails and mental health institutions. These individuals are often referred to as “chronically” homeless. Institutional care at hospitals, jails and treatment facilities carry a very high, largely uncompensated cost to the State. Per the 2001 homeless census, over 21,000 persons are homeless each day in Missouri.

There is a solution that has proven to work in other states: supportive housing that is affordable to the individual, combined with services that are available to meet the individual’s ongoing supportive living needs. One will not work without the other. Housing without appropriate services, or services without stable, secure housing is doomed to fail.

The federal homeless policy academies and the NAEH initiative to end chronic homelessness in the next decade are based on a model that promotes four principles:

- (a) Plan for Outcomes – collect the data necessary to measure and evaluate successful outcomes;

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- (b) Close the Front Door – develop policies for discharge planning from public institutions that connect individuals with housing and services;
- (c) Open the Back Door – construct supportive housing with critical services for the chronically homeless; and
- (d) Build the Infrastructure – recognize that for most individuals, eliminating the threat of homelessness is a function of affordable housing, adequate incomes and available services.

The Action Plan for the State of Missouri is based on these principles. It is our belief that individuals who are chronically homeless, can be housed and provided appropriate services at costs significantly less than the public is now incurring for their periodic institutional care. Our Goals and Recommended Action Steps propose a broad, inter-departmental strategy to address needs, provide housing and services and measure the fiscal impact of these programs.

Intuitively, the State of Missouri ought to be able to realize an overall cost savings from this approach; however, its unclear how much cost savings could be realized, in which areas, and at what initial start-up cost. The members of the State of Missouri Governor's Committee to End Homelessness Team recommends that the first step in the implementation of the following Action Plan should be a thorough review of the costs and benefits of the limited number of current supportive housing sites in Missouri.

Instead of asking for the allocation of additional state funding on the hope and expectation that the overall cost savings experiences from New York, Connecticut

Declining wages have put housing out of reach for many workers; in every state, no one earning minimum wage can afford a one or two bedroom apartment at Fair Market Rent (FMR). At minimum wage, a person must work between 80 and 119 hours a week to afford a home.

--National Low
Income Housing
Coalition

The housing wage
in Missouri is
\$11.12 an hour.

--National Low
Income Housing
Coalition

and California can be realized in Missouri, we are proposing that we look at our own limited experiences first. We are confident that the measures proposed in the following Action Plan can end chronic homelessness in our state and can be accomplished at an overall savings level to the state. The evaluation of our own experiences will ensure that when a recommendation is presented for additional state appropriations for one program that we will also be able to demonstrate where the State can expect to achieve corresponding cost savings in other areas.

THE FIRST STEPS

Homeless Action Plan To End Chronic Homelessness In Ten Years

1. Assign the Division of Planning and Budget the responsibility to conduct a cost/benefit analysis of the current supportive housing programs in Missouri and prepare a projection of the overall costs and benefits of implementing the Ten Year Homeless Action Plan.
2. Re-affirm the functions of the Missouri Governor's Committee to End Homelessness by Governor's Executive Order. The Council is directed to complete the following tasks by June 30, 2004:
 - The Governor's Committee to End Homelessness will be composed of representatives from the following state departments and other homeless coordination service agencies. (List attached)

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- The Council should be directed to pursue all available federal funding to support the implementation of the Missouri Action Plan.
- Ensure that the Division of Planning and Budget has access to all necessary program information and reports to conduct the cost/benefit analysis of the current supportive housing programs in Missouri.
- Review and recommend measures to improve access to state administered Mainstream Service Programs (Medicaid, TANF, SSI, CHIP, Workforce Investment Act, Food Stamps and Veteran's Health Care and Benefits) by homeless individuals and families.
- Review and recommend measures to establish state policies that require affected agencies to assure appropriate housing and community treatment for individuals with disabilities discharged from institutional settings.
- Review the State of Missouri Homeless Action Plan to End Chronic Homelessness annually and present recommendations on the implementation strategy.

Disabled persons (serious mental illness, developmental disabilities, HIV and substance abuse) are increasingly spending nights in homeless shelters with a 70% increase from 1998 to 2001.

A considerable amount of public dollars is spent essentially maintaining people in a state of homelessness. Studies have concluded that providing "supportive housing" for mentally ill homeless people essentially pays for itself.

--Culhane

VISION AND MISSION STATEMENT

Homelessness is unacceptable in Missouri. Therefore, all individuals have safe, affordable housing in healthy communities with access to a network of supportive services.

Our mission is to end homelessness by:

- ◆ Establishing strategies to promote public and private coordination and collaboration
- ◆ Developing new strategies to evaluate and reallocate resources
- ◆ Removing barriers to access
- ◆ Meeting immediate support service and affordable housing needs
- ◆ Implementing effective solutions to build economic security
- ◆ Promoting and supporting activities that prevent homelessness

As a result of these actions, the State of Missouri will have the resources to end chronic homelessness within ten years.

To accomplish this vision, the State of Missouri Governor's Committee to End Homelessness Team offers the following six goals and accompanying activities as a Plan of Action.

Goal One: Assemble information on Homeless Population and resources within the State

Action Steps

- Create baseline data on the number of homeless.
- Create inventory of existing housing.
- Create inventory of existing services.
- Do cost analysis of housing and services.
- Identify gaps.
- Identify barriers to mainstream resource utilization.
- Recommend measures to improve access to Mainstream Service Programs by homeless individuals and families.
- Review federal guidelines on improving homeless access to mainstream services for applicability to the State of Missouri.
- Review the Homeless Missourians Information System (HMIS) to establish mainstream service eligibility factors as a basic component of the general-intake processing fields.

Approximately 42% of people experiencing homelessness are employed. In the cities, many of these workers are employed by day labor agencies, an industry characterized by low pay, no job security, no health insurance, and inadequate worker protections.

Families with children are among the fastest growing segments of the homeless population. Families are spending the night in homeless shelters with an increase of nearly 60% from 1998 to 2001.

--MASW Survey

Goal Two: Provide housing for chronically homeless individuals and families that is both affordable and appropriate for the delivery of supportive services and that fosters a transition or placement into permanent supportive housing.

Action Steps

- Identify services that could be integrated to fill gaps and remove barriers.
- Prepare draft Memorandum of Agreement outlining responsibilities and annual production goals.
- Execute a Memorandum of Agreement between key state agencies that:
1) identifies common policies and principles; 2) establishes an annual production goal for creation of permanent supportive housing units; and 3) assigns evaluation responsibilities to coordinate between the various agencies, i.e., DED, DMH, Social Services, and Health.
- Establish coordination between the networks of Continuum of Care's with other state homeless programs. Examples include Assertive Community Treatment (ACT) Teams and Mental Health and Drug Courts.

Goal Three: Create commitment to end barriers to the use of mainstream resources to end chronic homelessness by engaging the State Leadership (Department Directors, Legislature and Governor's Office) in the adoption of strategies, allocation of resources and the implementation of the recommendations of this report.

Action Steps

- Tailor message to target audiences with recommendations for service enhancement and improvement.
- Disseminate information for educational purposes.
- Re-affirm the functions of the Missouri Governor's Committee to End Homelessness by Governor's Executive Order.
- Present recommendations of the Missouri Governor's Committee to End Homelessness to the Governor's Office for adoption and implementation.
- Develop an implementation support strategy that would identify the expected public and private support for the adoption of the recommendations by the Governor and the recommendation for the identification of additional homeless support funds.
- Support the development of a comprehensive, statewide, homeless data collection and analysis reporting capacity.

The education and future of Missouri children is impacted by the homelessness they experience today. Childhood homelessness is often hidden; however, in 1997 there were 7,695 known homeless children and youth in the state and by 2000 that total rose to 17,560.

--Missouri
Department of
Elementary and
Secondary
Education

Per the census ,
646,000
Missourians have
no health care
insurance.

Goal Three: *Continued*

- Conduct an analysis on the existing methodologies that are used to report on housing and services provided to homeless individuals. The review should include database systems maintained through the Homeless Missourians Information System, the local and state homeless Continuum of Care Plans, the U.S. Veterans Administration, the Missouri Department of Corrections, the Department of Health and Senior Services, the Department of Mental Health and Department of Social Services.
- Prepare a model for the aggregation of all the available data reports and assign the Missouri Association of Social Welfare the responsibility to issue an annual Missouri Homeless Status Report.
- Support the development of integration of all funding received by the State for the express purposes of housing and subsequent activities, i.e., ESG, HOPWA, McKinney-Vento, CDBG, HOME.

Goal Four: Coordinate the various state discharge policies to end the increasing number of formerly institutionalized individuals that wind up homeless.

Action Steps:

- Establish State policies that require affected agencies to assure appropriate housing and community treatment for individuals with disabilities discharged from institutional settings in compliance with the *Olmstead* U.S Supreme Court ruling.
- Coordinate with PIC as they have responsibility for the development of appropriate discharge planning guidelines by affected state agencies for people with disabilities.
- Assign the relevant state agencies the task of enumerating both the existing census of institutionalized residents that should be offered services in community settings consistent with the *Olmstead* decision and the number of individuals “at-risk” of institutionalization due to inadequate or an insufficient inventory of community supportive housing.

The number of uninsured persons seeking treatment is increasing; overall, Health Care for the Homeless programs report a 35% increase in the numbers of their patients who are uninsured.

For every three people who experience homelessness, one of them is a Veteran.

--Department of Veterans Affairs

Goal Five: Develop an evaluation methodology on local planning collaborative models of how integrated housing and homeless service delivery strategies can be implemented at the community level.

Action Steps

- Prepare a model outline for outcome based measurements for program evaluation.
- Outcome measurements could include: (1) tracking the reduction in homeless incidents of admissions to hospitals, jails, and crisis treatment facilities; (2) measuring the decrease in the length of stay at these facilities; and (3) monitoring the decrease in the period of homelessness by individuals receiving services through a collaborative model program.
- Develop and conduct training workshops for other communities to promote the replication of community integrated homeless supportive service programs with supportive housing programs.
- Develop a recognition process to reward communities that have implemented a local collaborative planning in the future award of homeless assistance funding, including the placement of eligibility case workers, the selection of supportive housing developments and the awarding of post-hospitalization recuperative center funding.

Take the necessary actions to fully utilize federal and other funds available to address the needs of the

During FY2002, approximately 30% of the

homeless and to meet the goal of ending chronic homelessness in ten years.

Action Steps:

- Continued advocacy for increasing the financial capacity of the State Housing Trust Fund.
- MHDC will support ending homelessness in Missouri through action steps enumerated in their strategic plan.
- Challenge local and state public housing authorities to award project based Section 8 Rental Assistance to developments providing supportive housing units in the state.
- Challenge local and state HUD Homeless Continuum of Care Plans to propose Shelter Plus Care applications that will provide rental assistance support to developments proposing supportive housing units in the State.
- Aggressively pursue all available funding through the federal homeless assistance programs including the HUD McKinney Homeless Supportive Housing Programs, the HUD Section 8 Rental Assistance Programs and the mainstream service programs administered by the U.S. Department of Health and Human Services (HHS) and the U.S. Veterans' Administration.
- Aggressively pursue funding partnerships with the private sector engaged in providing support for the nonprofit, faith-based homeless service community.

THE GOVERNOR'S COMMITTEE TO END HOMELESSNESS

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Department of Corrections-----*Tom Hedges, Northwest Region Administrator*
Department of Economic Development-----*James Robnett, Housing Technical Assistance Advisor*
Department of Elementary and Secondary Education-----*Amy James, Supervisor, Federal Discretionary Grants and State Homeless Coordinator*
Department of Health-----*Rita McElhany, Ryan White HOPWA Program Director*
Department of Mental Health-----*Karia Basta, Housing Director*
Division of Social Services-----*Jeannie Chaffin, Family Support Division, Program Manager*
Division of Youth Services-----*Alida Jenkins, Case Management Coordinator*
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Missouri Coalition Against Domestic Violence-----*Cheryl Robb-Welch, Operations Director*
Missouri Head Start--Columbia-----*Darin Preis, Director*
Missouri Housing Development Commission-----*Marissa Moment-Brown, Public Information Specialist*
Office of the Governor-----*Tina Shannon, Assistant Director for Legislative Affairs*
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Swope Health Services-----*Anne Lesser, Director of Outreach and Community Services*
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